IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Michael E. McMahan, et al. § Examiner: William P. Neuder

Serial Number:

10/638,840

Group Art Unit: 3672

Filing Date:

08/11/2003

Attorney Docket No.:D5407-184

Title: Cup Seal Expansion Tool

Mail Stop Amendment Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT

Dear Sir:

Responsive to the Office Action mailed 02/25/2005 please make the following amendments:

PTO/SB/21 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	Application Number	10/638,840									
TRANSMITTAL	Filing Date	08/11/2003	08/11/2003								
FORM	First Named Inventor	Michael E. M									
	Art Unit	3672									
(to be used for all correspondence after initial filing)	Examiner Name	William P. Ne	euder								
	Attorney Docket Number	D5407-184	D5407-184								
Total Number of Pages In This Submission											
ENCLOSURES (Check all that apply)											
Fee Transmittal Form	rawing(s)			Allowance Communication to TC							
Fee Attached Li	icensing-related Papers	1		l Communication to Board eals and Interferences							
Amendment/Reply	etition	· [I Communication to TC Il Notice, Brief, Reply Brief)							
After Final P	etition to Convert to a rovisional Application		Proprie	etary Information							
	ower of Attorney, Revocation than the contract of Correspondence A	Status	Letter								
	erminal Disclaimer		✓ Other below)	Enclosure(s) (please Identify							
Extension of time request	equest for Refund		•	ment Postcard							
Information Disclosure Statement C	D, Number of CD(s)										
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Certified Copy of Priority Document(s) Remark		L	-	· · · · · · · · · · · · · · · · · · ·							
Reply to Missing Parts/											
Incomplete Application Reply to Missing Parts											
under 37 CFR 1.52 or 1.53											
SIGNATURE OI	F APPLICANT, ATTO	RNEY, OR	RAGENT								
Firm Name Duane Morris LLP											
Signature Signature											
Printed name Gary R. Maze				-							
Date 03/30/2005	F	Reg. No. 4	12,851								
CERTIFICATE OF TRANSMISSION/MAILING											
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:											
Signature Course Chaples											
Typed or printed name Tracie Thigpen		 ,	Date	03/30/2005							

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date 03/30/2005

PTO/SB/17 (12-04)
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TRANS	o on 12/09/2	2004		Complete if Known							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number		10/638,840					
FEE TRANSMITTAL		_ F	Filing Date		08/11/2003						
For FY 2005			First Named Inventor		Michael E. McMahan						
				Examiner Name		William P. Neuder					
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		3672					
TOTAL AMOUNT OF PAYM	ENT (\$)	600		Attorney Docket	No.	D5407-	184				
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 02-0429 Deposit Account Name: Baker Hughes Incorporated											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below Charge fee(s) indicated below											
Charge any additional fee(s) or underpayments of fee(s)											
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card											
information and authorization o											
FEE CALCULATION											
1. BASIC FILING, SEAR	CH, AND E					UNIATION					
		mall Entity		H FEES Small Entity		INATION Sma <u>ll</u>	Entity				
Application Type	Fee (\$)		e (\$)	Fee (\$)	Fee ((\$)	Fees Paid (\$)			
Utility	300		00	250	200		•				
Design	200		00	50	130	•	5 .	· · · · · · · · · · · · · · · · · · ·			
Plant	200		00	150	160		0				
Reissue	300		00	250	600		0 -				
Provisional	200	100	0	0	0		0 -	·			
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100											
Multiple dependent claims		i iteissues, euch int	acpen		·	in the or	iginai paten	360 180			
Total Claims E	xtra Claims	Fee (\$) F	ee Pa	id (\$)	Multip	le Depen	dent Claims				
24 - 20 or HP = 1 HP = highest number of total da		x =			Fee	· (\$)	Fee Paid	<u>(\$)</u>			
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6 -3 or HP = 3 HP = highest number of indeper	ndent claims	\times 200 = $\frac{1}{2}$	500								
HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE											
If the specification and o	lrawings e							25 for small entity)			
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets											
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)											
Other:											
SUBMITTED BY	Y. Z.		Re	gistration No.			Tolophone				
Signature	$\mu \delta$	-		torney/Agent)	42,851		relephone 7	713.402.3917			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Name (Print/Type) Gary R. Maze